

When universal health care falls short, French people with disabilities move to Belgium

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Institutions in Wallonia that provide services to French citizens, known under the French acronym SAFAE, receive financing by France's social-security system.
Credit: AViQ/OpenStreetMap

Like other European countries, France boasts a strong welfare state,

which academics in migration studies tend to view as a "pull factor" for potential residents. However, we often pay less attention to the system's limits. In fact, in recent years, holes in the French care system have led some citizens to seek care in other European countries.

A "competitor" to France that may not come immediately to mind is Wallonia, a Francophone region in southern Belgium. It is estimated that about [8,233](#) French citizens with disabilities live in institutions located there. While this cross-border presence has a [long history](#) national media has focused on what is commonly described as a form of [exile](#), including documented cases of [abusive practices](#) occurring in some Belgian institutions.

To better understand the causes and impacts of this migration, we conducted 23 interviews with parents of French citizens who moved to Belgian institutions, NGO representatives, and [institution](#) directors as part of the [MiTSoPro](#) research project . The move from France to Belgium concerns different types of disability, above all [intellectual, psychic and autism spectrum disorders](#). In our research, the majority of the interviews with families were carried out with parents of autistic people.

Pushed out of France

For many French parents, placing their children in a Belgian institution is not so much a choice as the only alternative they have. The limited number of structures able to provide care to children and adults with disabilities was mentioned by virtually all interviewees. As one parent explained:

"[A Belgian institution] was not our first goal. This was a choice that was imposed, really [...] the real problem was the lack of solutions."

The situation is particularly severe in the Île-de-France region, which surrounds the French capital. For example, in 2019 the Seine-Saint-Denis department (which is part of Île-de-France) documented [1,000 adults and 400 children without a care solution](#). People with multiple or severe forms of disability are particularly likely to be left out by the system.

But French parents also turn to Belgium because of the superior quality and range of support on offer. Belgian schools are often perceived as providing services that better adapted to the individual development of persons with disability. A common perception among the parents is that the Belgian system for children places greater emphasis on the educational aspects while the French system focuses more on the medical dimension and is therefore less efficient when it comes to stimulating children's autonomy.

Growing cross-border infrastructure

Belgian institutions supporting French citizens are de facto financed by the French welfare system, which shoulders the costs for such services. Combined with high demand and cheaper legal requirements, the state funding has led to the proliferation of institutions on the Belgian side of the border, both [nonprofits \(associations\) and profit-oriented \(private companies\)](#). The Belgian government refers to the latter as "services approved and financed by a foreign authority" (in French, SAFAE) and institutions providing them have a [legal status](#) distinct from similar Belgian structures.

Patients are not the only ones to move across borders—professionals also do as some of them regularly visit or exchange with institutions from both sides of the border. Over time, this course of events has been strengthened by formal and informal cross-border networks of professionals, who keep in touch and exchange expertise between the

two countries. Indeed, many parents met during our research were directed toward Belgium by French professionals such as [social workers](#), healthcare professional or directors of french institutions.

Different families, different realities

How the families experience this arrangement depends on variables such as their geographic proximity to Belgium, access to transportation, disposable income and, not to forget, their own fitness. For relatively well-off residents of Île-de-France region, placing their child in a Belgian institution might be a feasible solution, while for more modest households in the South of France, it would be a much more difficult choice. Moreover, to many the COVID-19 pandemic and its intra-EU travel bans brought home the border's hard reality.

While most of the parents we met were relatively satisfied with the care provided in Belgium, some parents still emphasize how distance impacts their ability to maintain a family life with their child abroad. This is how the mother of an adult living in a Belgian institution describes the situation:

"Apparently [my son] is doing well where he is. The problem is that we're getting older. Unfortunately, my husband has become visually impaired, so I do the trips to Belgium alone. [...] If [our son] was closer, I'm sure it would be easier for everybody. Even for him, he would be able to participate a bit more to all the family events. He would feel less isolated."

The bitter fruits of freedom of movement

The presence of French citizens living with disabilities in Belgium can be interpreted in different ways. On the one hand, it can be viewed—and

is sometimes experienced by parents in this way—as an expression of the [principle of freedom of movement within the EU](#). On the other hand, it can also be read as an exclusion from one's community, which is contrary to [Article 19](#) of the UN Convention on the Rights of Persons with Disabilities.

While this example is specific to France and Belgium, it goes to show just how much national welfare policies can impact migration in the EU. It also reveals what bitter undertones freedom of movement can sometimes carry.

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